



APPOINTMENTS & TRANSPORTATION (NEXT 14 DAYS)

Keep only upcoming appointments here. Move old ones to your notes or a folder.

Care Recipient: _____

DOB: _____

Primary Doctor: _____

Phone: _____

Insurance Member ID (last 4): _____ (optional)

Upcoming Appointments

Date	Time	Provider / Clinic	Reason	Address	Ride Plan	What to Bring	Notes / Questions

Quick Prep Checklist (circle or check)

- ID and insurance card
- Symptom notes (when started, how often)
- Test results or referral paperwork
- Med list (updated)
- Questions list (top 3)
- Water/snack, hearing aids/glasses, mobility aid

Next call to make / follow-up needed:

Results to watch for (labs, imaging, referrals):



BILLS AND PAPERWORK (THIS MONTH)

This is not your filing system. It is your "nothing falls through the cracks" page.

Care Recipient: _____ Month: _____

Bills to Pay

Bill	Due Date	Amount	How Paid (online/check/phone)	Paid Date	Confirmation #	Notes

Forms to Sign or Submit

Form	Who It's For	Due Date	Where It Goes	Status (To Do / Sent)	Notes

Calls You Need to Make

Who	Phone	Reason	Best Time to Call	Done?



MEDS AND CARE NOTES (QUICK VIEW)

Keep this high level. Store detailed medical records elsewhere.

Care Recipient: _____

Allergies: _____

Pharmacy: _____

Phone: _____

Medication List (Quick)

Medication	Dose	When	Purpose	Refill Date	Notes

Care Notes (What changed this week?)

Sleep: _____

Appetite: _____

Mood / Behavior: _____

Pain / Mobility: _____

Safety concerns (falls, wandering, driving): _____

Questions for the Next Visit

1. _____

2. _____

3. _____